



DT20 Recd CT/PTO 09 MAY 2003

Receipt
P 9

Copy

Patent

Attorney Docket # 4925-204PUS

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of

Oscar SALONAHU et al.

Serial No.: 10/030,798

Filed: May 09, 2002

For: A Method Of Selecting A New Cell

Group Art:

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

May 7, 2003

(Date of Deposit)

Michael C. Stuart

Name of applicant, assignee or Registered Representative

Signature

May 7, 2003

Date of Signature

REQUEST FOR CORRECTION OF FILING RECEIPT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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JUN 06 2003

Technology Center 2600

SIR:

Attached is a copy of the official filing receipt received from the U.S. Patent and Trademark Office in the above-identified application.

There is an error in Filing Date which should read as follows:

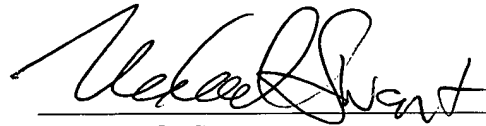
July 14, 1999

A copy of the filing receipt is submitted herewith on which the requested change is entered in red.

It is respectfully requested that a corrected filing receipt be issued.

Respectfully submitted,
COHEN, PONTANI, LIEBERMAN & PAVANE

By:

A handwritten signature in black ink, appearing to read "Michael C. Stuart", written over a horizontal line.

Michael C. Stuart
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Dated: May 7, 2003



UNITED STATES
PATENT AND
TRADEMARK OFFICE

Commissioner for Patents
Washington, DC 20231
www.uspto.gov

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
10/030,798	05/09/2002	2681	3744	4925-204PUS	2	162	5

CONFIRMATION NO. 5614

CORRECTED FILING RECEIPT



OC000000009827605

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Date Mailed: 04/11/2003

Receipt is acknowledged of this regular Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Filing Receipt Corrections, facsimile number 703-746-9195. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

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Domestic Priority data as claimed by applicant

This application is a 371 of PCT/EP00/06645 07/12/2000

Foreign Applications

UNITED KINGDOM 9916565.6 (07/04/1999) →

07/14/1999

If Required, Foreign Filing License Granted: 04/01/2003

Projected Publication Date: None, application is not eligible for pre-grant publication

Non-Publication Request: No

Early Publication Request: No

Title

A method of selecting a new cell

Preliminary Class

455

P05124450



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Washington, DC 20231
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Bib Data Sheet

CONFIRMATION NO. 5614

SERIAL NUMBER 10/030,798	FILING DATE 05/09/2002 RULE:	CLASS 455	GROUP ART UNIT 2681	ATTORNEY DOCKET NO. 4925-204PUS
APPLICANTS Oscar Salonaho, Helsinki, FINLAND; Kaisu Iisakkila, Helsinki, FINLAND; Sari K. Korpela, Kaunlainen, FINLAND; Kaj Jansen, Salo, FINLAND;				
** CONTINUING DATA ***** This application is a 371 of PCT/EP00/06645 07/12/2000				
** FOREIGN APPLICATIONS ***** UNITED KINGDOM 9916565.6 07/04/1999				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY FINLAND	SHEETS DRAWING 162	TOTAL CLAIMS 162
				INDEPENDENT CLAIMS 5
ADDRESS Michael C Stuart Cohen Pontani Lieberman & Pavane 551 Fifth Avenue Suite 1210 New York, NY 10176				
TITLE A method of selecting a new cell				
FILING FEE RECEIVED 3744	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

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